Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF NEW JERSEY		
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport).	Shane First name N.	First name
	Bring your picture identification to your meeting with the trustee.	Middle name Ciarrocchi Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years	,	
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-0197	

4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case): □ I have not used any business name or EINs.		
		■ I have not used any business name or EINs.			
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINS		
5.	Where you live	2 Stella Drive	If Debtor 2 lives at a different address:		
		Pittsgrove, NJ 08318 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Salem			
		County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for	Check one:	Check one:		
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.		
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)		

7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	choosing to file under	☐ Ch	apter 7				
		☐ Ch	apter 11				
		☐ Ch	apter 12				
		■ Ch	napter 13				
3.	How you will pay the fee		about how yo	ou may pay. Typica attorney is submitt	lly, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or mone alf, your attorney may pay with a credit card or check with	
			I need to pa	y the fee in install		n, sign and attach the Application for Individuals to Pay	
			ū	,	Official Form 103A).	n only if you are filing for Chapter 7. By law, a judge may	
			but is not rec applies to yo	uired to, waive you ur family size and y	or fee, and may do so only if you ou are unable to pay the fee in	ur income is less than 150% of the official poverty line the installments). If you choose this option, you must fill out ial Form 103B) and file it with your petition.	
9. Have you filed for bankruptcy within the							
	last 8 years?	☐ Ye			When	Coop number	
			District District		When	Case number Case number	
			District		When	Case number Case number	
			DISTRICT		wrien	Case number	
0.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an	■ No					
	affiliate?						
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
1.	Do you rent your residence?	■ No	. Go to	ine 12.			
	residence?	☐ Ye	s. Has yo	our landlord obtaine	ed an eviction judgment agains	t you and do you want to stay in your residence?	
				No. Go to line 12.			

Case number (if known)

Debtor 1 Shane N. Ciarrocchi

Deb	otor 1 Shane N. Ciarrocc	hi			Case number (if known)		
Par	t 3: Report About Any Bu	einossos	Vall Own as	a Sala Brancia	tor		
		311163363	Tou Own as	a Sole Froprie	toi		
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to Pa	rt 4.			
		☐ Yes.	Name an	d location of bus	siness		
	A sole proprietorship is a						
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name of	business, if any			
	If you have more than one sole proprietorship, use a		Number,	Street, City, Sta	te & ZIP Code		
	separate sheet and attach it to this petition.		Check th	e annronriate ho	ox to describe your business:		
	it to this polition.				ness (as defined in 11 U.S.C. § 101(27A))		
					Estate (as defined in 11 U.S.C. § 101(51B))		
			_	•	lefined in 11 U.S.C. § 101(53A))		
				•	er (as defined in 11 U.S.C. § 101(6))		
				one of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure n 11 U.S.C. 1116(1)(B).				
	For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).	■ No.	I am not f	iling under Chap	oter 11.		
		□ No.	I am filing Code.	under Chapter	11, but I am NOT a small business debtor according to the definition in the Bankruptcy		
			I am filing	under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.		
Par	t 4: Report if You Own or	Have An	/ Hazardous	Property or An	y Property That Needs Immediate Attention		
14.	Do you own or have any	■ No.		. ,	, , ,		
	property that poses or is						
	alleged to pose a threat of imminent and	☐ Yes.	What is the	hazard?			
	identifiable hazard to						
	public health or safety? Or do you own any property that needs immediate attention?			e attention is y is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is the	e property?			
					Number, Street, City, State & Zip Code		

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Den	Snane N. Clarrocc	nı		Case nu	ITIDEL (if known)			
Par	6: Answer These Quest	ions for R	eporting Purposes					
16.	What kind of debts do you have?	16a.	Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
			□ No. Go to line 16b.					
			Yes. Go to line 17.					
		16b.	Are your debts primarily business debts? <i>Business debts</i> are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.					
			☐ No. Go to line 16c.					
			☐ Yes. Go to line 17.					
		16c.	State the type of debts you	owe that are not consumer debts or bus	iness debts			
17.	Are you filing under Chapter 7?	■ No.	I am not filing under Chapte	er 7. Go to line 18.				
	Do you estimate that after any exempt property is excluded and administratory are paid that funds will be available to distribute to unsecured creditors?							
	administrative expenses		□ No					
	are paid that funds will be available for distribution to unsecured creditors?		☐ Yes					
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99 □ 100-1	99	☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000			
		□ 200-9	99					
19.	How much do you estimate your assets to be worth?	□ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion			
20.	How much do you estimate your liabilities to be?	☐ \$100,	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion			
Par	7: Sign Below							
For	you	I have ex	amined this petition, and I de	eclare under penalty of perjury that the ir	nformation provided is true and correct.			
			ible, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7.					
		If no attor	s not an attorney to help me fill out this).					
		I request	relief in accordance with the	chapter of title 11, United States Code,	specified in this petition.			
		bankrupto and 3571	cy case can result in fines up		ney or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519,			
		Shane I	ne N. Ciarrocchi N. Ciarrocchi e of Debtor 1	Signature of De	ebtor 2			
		Executed	August 13, 2016 MM / DD / YYYY	Executed on	MM / DD / YYYY			
					•			

Debtor 1 Shane N. Ciarroco	chi	Cas	se number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite	ed States Code, and have e	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies, schedules filed with the petition is incorrect.	, certify that I have no know	vledge after an inquiry that the information in the
	/s/ Anthony Landolfi	Date	August 13, 2016
	Signature of Attorney for Debtor		MM / DD / YYYY
	Anthony Landolfi Printed name		
	Anthony Landolfi, Esq., P.C.		
	PO Box 111 295 Bridgeton Pike		
	Mantua, NJ 08051 Number, Street, City, State & ZIP Code		
	Contact phone (856)468-5900	Email address	_anthony@landolfilaw.com

al8953 Bar number & State

Fill	in this information to identify your case:		
Deb	tor 1 Shane N. Ciarrocchi		
Det	First Name Middle Name Last Name		
	Ise if, filing) First Name Middle Name Last Name		
Uni	ed States Bankruptcy Court for the: DISTRICT OF NEW JERSEY		
Cas (if kn	e number	_	if this is an ded filing
Of	icial Form 106Sum		
Su	mmary of Your Assets and Liabilities and Certain Statistical Information	1	12/15
info	s complete and accurate as possible. If two married people are filing together, both are equally responsible for mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend original forms, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par	1: Summarize Your Assets		
		Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	5,561.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	5,561.00
Par	2: Summarize Your Liabilities		
		Your lia	abilities
			you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,671.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	2,523.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	88,857.00
	Your total liabilities	\$	93,051.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,633.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,511.00
Par	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other sch	edules.
7.	Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a personal,	family, or
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this the court with your other schedules.	s <i>box</i> and sı	ubmit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,052.52

\$

O. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Dout A on Cohodula E/E compthe following.	Total c	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	2,523.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	2,523.00

Debtor 1 Shane N. Ciarrocchi First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY	
First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name	
(Spouse, if filing) First Name Middle Name Last Name	
United States Bankruptcy Court for the: DISTRICT OF NEW JERSEY	
Case number	☐ Check if this is an amended filing
	•
Official Form 106A/B	
Schedule A/B: Property	12/15
In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the	
think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsi information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name	
Answer every question.	(
Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In	
Do you own or have any legal or equitable interest in any residence, building, land, or similar property?	
■ No. Go to Part 2.	
☐ Yes. Where is the property?	
Part 2: Describe Your Vehicles	
Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.	le any vehicles you own that
3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles	
5. Cars, valis, trucks, tractors, sport utility vehicles, motorcycles	
□ No	
■ Yes	
Do not deduct o	ecured claims or exemptions. Put
the amount of a	ny secured claims on Schedule D:
	Have Claims Secured by Property.
Year: 2005 □ Debtor 2 only Current value of the Property of t	
Other information:	h
62.4	26.00 \$2.426.00
Check if this is community property (see instructions)	36.00 \$2,136.00
(
4. Weterwest already mater hames ATVs and other recreational valuables attended and accessories	
4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
_	
■ No	
□ Yes	
□ Yes	
	\$2,136.00
☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for	\$2,136.00
 Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here	
 Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here	Current value of the
 Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here	Current value of the portion you own? Do not deduct secured
 Yes Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here	Current value of the portion you own?

Official Form 106A/B Schedule A/B: Property

DCI	ו וטוט	Snane N. Ci	arroccni Case number (if known)	'
ı	Yes.	Describe		
			Household Goods & Furnishings	\$1,500.00
[□No	es: Televisions a	and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music I phones, cameras, media players, games	collections; electronic devices
			Electronics	\$250.00
[<i>Exampl</i> e ☐ No		I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coir ons, memorabilia, collectibles	n, or baseball card collections;
			Hot Wheel Toy Collecton	\$1,450.00
[[] [] []	■ No □ Yes. Firearm Examp ■ No □ Yes. Clother Examp □ No	musical instr Describe ns bles: Pistols, rifle Describe	ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes	and kayaks; carpentry tools;
			Clothes	\$150.00
ı	No		welry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,	gold, silver
ı	Examp ■ No	rm animals oles: Dogs, cats, Describe	birds, horses	
I	■ No	her personal an	d household items you did not already list, including any health aids you did not list formation	
15.			of all of your entries from Part 3, including any entries for pages you have attached number here	\$3,350.00

Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own?

Do not deduct secured

Official Form 106A/B Schedule A/B: Property page 2

D	ebtor 1	Shane N. Ciarrocchi	Case number (if known)	
			Clá	aims or exemptions.
_				·
6.	. Cash Examp □ No	oles: Money you have in your wallet, in your home, in a safe deposit b	ox, and on hand when you file your petition	
	Yes			
			Cash	\$75.00
17.	Examp	its of money oles: Checking, savings, or other financial accounts; certificates of depinstitutions. If you have multiple accounts with the same institution		and other similar
	■ No	Institution name		
	⊔ Yes			
18.	Examp	, mutual funds, or publicly traded stocks ples: Bond funds, investment accounts with brokerage firms, money m	arket accounts	
	■ No	Institution or issuer name:		
	□ Yes	Institution or issuer name:		
19.	joint ve	ublicly traded stock and interests in incorporated and unincorporenture	ated businesses, including an interest in an l	LLC, partnership, and
	■ No	O'comment to the formation of the second the second		
	⊔ Yes.	Give specific information about them Name of entity:	% of ownership:	
20.	Negotia	nment and corporate bonds and other negotiable and non-negotiable instruments include personal checks, cashiers' checks, promisson egotiable instruments are those you cannot transfer to someone by significant transfer to some one some of the source of th	ory notes, and money orders.	
	■ No			
	☐ Yes. 0	Give specific information about them Issuer name:		
21.		nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings acc	counts, or other pension or profit-sharing plans	
	☐ Yes. I	List each account separately.		
		Type of account: Institution name		
22.	Your sh	ty deposits and prepayments hare of all unused deposits you have made so that you may continue ples: Agreements with landlords, prepaid rent, public utilities (electric,	, ,	others
	■ No	Institution name	or individual:	
	⊔ Yes	Institution name	or individual.	
23.	_	ies (A contract for a periodic payment of money to you, either for life of	or for a number of years)	
	■ No □ Yes	Issuer name and description.		
24.	26 U.S.C	ts in an education IRA, in an account in a qualified ABLE program C. §§ 530(b)(1), 529A(b), and 529(b)(1).	n, or under a qualified state tuition program.	
	■ No □ Yes	Institution name and description. Separately file the rec	cords of any interests.11 U.S.C. § 521(c):	
25.	_ `	, equitable or future interests in property (other than anything list	ted in line 1), and rights or powers exercisabl	e for your benefit
	■ No □ Yes.	Give specific information about them		
)e			concrety	
26.	Examp	s, copyrights, trademarks, trade secrets, and other intellectual probles: Internet domain names, websites, proceeds from royalties and licenses.		
	■ No			

 $\hfill \square$ Yes. Give specific information about them...

De	ebtor 1	Shane N. Ciarrocchi		Case number (if known)	
	Examp ■ No	es, franchises, and other general intangit les: Building permits, exclusive licenses, con Give specific information about them		ses, professional licenses	
	□ 1es.	Sive specific information about them			
M	oney or p	roperty owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax ref	ınds owed to you			
	■ No				
	☐ Yes. (Give specific information about them, includ	ing whether you already filed the returns an	id the tax years	
	■ No	support es: Past due or lump sum alimony, spousal Sive specific information	support, child support, maintenance, divor	ce settlement, property sett	tlement
30.		mounts someone owes you les: Unpaid wages, disability insurance payn benefits; unpaid loans you made to son		າ pay, workers' compensat'	ion, Social Security
	☐ Yes.	Give specific information			
	Examp ■ No	s in insurance policies les: Health, disability, or life insurance; heal lame the insurance company of each policy Company name:			Surrender or refund value:
	If you a someon	erest in property that is due you from some the beneficiary of a living trust, expect proper has died. Give specific information		currently entitled to receive	
33.	Examp ■ No	against third parties, whether or not you es: Accidents, employment disputes, insura		for payment	
34.	Other c	ontingent and unliquidated claims of eve	ery nature, including counterclaims of th	e debtor and rights to set	t off claims
	☐ Yes.	Describe each claim			
35.	Any fin	ancial assets you did not already list			
		Give specific information			
36		ne dollar value of all of your entries from rt 4. Write that number here			\$75.00
Pa	rt 5: Des	cribe Any Business-Related Property You Ow	n or Have an Interest In. List any real estate in	Part 1.	
37	Do you o	wn or have any legal or equitable interest in a	ny husiness-related property?		
	■ No. Go		., Sacrices related property:		

Official Form 106A/B Schedule A/B: Property page 4

☐ Yes. Go to line 38.

Debt	tor 1	Shane N. Ciarrocchi		Case number (if known)	
Part		cribe Any Farm- and Commercial Fishing-Related Property You own or have an interest in farmland, list it in Part 1.	u Own or Have an Interes	it In.	
46. C	o you	own or have any legal or equitable interest in any farm	- or commercial fishin	g-related property?	
	No. 0	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Yo	ou Did Not List Above		
		have other property of any kind you did not already list les: Season tickets, country club membership	1?		
	No	·			
	1 Yes. (Give specific information			
54.		ne dollar value of all of your entries from Part 7. Write th	nat number here		\$0.00
	_	: Total real estate, line 2			\$0.00
		: Total vehicles, line 5	\$2,136.00		\$0.00
57.		: Total personal and household items, line 15	\$3,350.00		
-		: Total financial assets, line 36	\$75.00		
59.	Part 5	: Total business-related property, line 45	\$0.00		
		: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	: Total other property not listed, line 54	\$0.00		
62.	Total _I	personal property. Add lines 56 through 61	\$5,561.00	Copy personal property total	\$5,561.00
63.	Total o	of all property on Schedule A/B. Add line 55 + line 62			\$5,561.00

Fill in this infor	mation to identify your	case:			
Debtor 1	Shane N. Ciarroc	chi			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Lost Name		
(Spouse II, IIIIIIg)	First Name	Middle Name	Last Name		
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JEF	RSEY		
Case number					
(if known)				☐ Chec	k if this is an
				amer	nded filing
Be as complete a	and accurate as possible. listed on <i>Schedule A/B: I</i>	If two married people are Property (Official Form 106)	filing together, both are equally r A/B) as your source, list the prop ditional Page as necessary. On t	esponsible for supplying correct perty that you claim as exempt. I	If more space is
case number (if k	known).				
specific dollar a any applicable s funds—may be exemption to a	imount as exempt. Alter statutory limit. Some ex- unlimited in dollar amo	natively, you may claim t emptions—such as those unt. However, if you clain	iy the amount of the exemption the full fair market value of the e for health aids, rights to rece in an exemption of 100% of fair operty is determined to exceed	property being exempted up vive certain benefits, and tax-e market value under a law tha	to the amount of exempt retirement it limits the
Part 1: Ident	ify the Property You Cla	aim as Exempt			
1. Which set o	of exemptions are you c	laiming? Check one only,	even if your spouse is filing with	you.	
☐ You are o	claiming state and federal	nonbankruptcy exemption	s. 11 U.S.C. § 522(b)(3)		
You are o	claiming federal exemptio	ns. 11 U.S.C. § 522(b)(2)			

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2005 Nissian Altima 186000 miles Line from Schedule A/B: 3.1	\$2,136.00		\$2,136.00	11 U.S.C. § 522(d)(2)
Elle Holli ochedale PAB. G.1			100% of fair market value, up to any applicable statutory limit	
Household Goods & Furnishings Line from Schedule A/B: 6.1	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(3)
Line from Schedule A/B: 6. 1			100% of fair market value, up to any applicable statutory limit	
Electronics Line from Schedule A/B: 7.1	\$250.00		\$250.00	11 U.S.C. § 522(d)(3)
Line IIIIII Schedule PAB. 1.1			100% of fair market value, up to any applicable statutory limit	
Hot Wheel Toy Collecton Line from Schedule A/B: 8.1	\$1,450.00		\$1,450.00	11 U.S.C. § 522(d)(5)
LINE HOLL SCHEDULE PAD. U.1			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$150.00		\$150.00	11 U.S.C. § 522(d)(3)
Line nom <i>Schedule PVD</i> . 11.1			100% of fair market value, up to any applicable statutory limit	

De	btor 1	Shane N. Ciarrocchi			Case number (if known)		
		f description of the property and linedule A/B that lists this property	ne on	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
				Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	Cas			\$75.00		\$75.00	11 U.S.C. § 522(d)(5)
	LITIE	ne from <i>Schedule A/B</i> : 16.1		100% of fair market value, up to any applicable statutory limit			
3.		you claiming a homestead exe oject to adjustment on 4/01/19 ar	•			ed on or after the date of adjustme	nt.)
		No					
		Yes. Did you acquire the proper	rty covere	d by the exemption wi	thin 1	215 days before you filed this case	?
		□ No					
		☐ Yes					

	N. Ciarrocchi				_		
First Name		Middle Name La	ast Name				
Debtor 2 (Spouse if, filing) First Name		Middle Name La	ast Name		-		
United States Bankruptcy Co	urt for the· Γ	ISTRICT OF NEW JERSEY					
ormod otatoo Barmaptoy oo					-		
Case number							
(if known)						_	if this is an
						amend	led filing
Official Form 106D							
	d!+ \A/I	ha Hava Claima Ca	الممسيم	h Duna a a a t			
Schedule D: Cre	aitors w	ho Have Claims Se	ecurea	by Propert	<u>у</u>		12/15
		married people are filing together, l umber the entries, and attach it to the					
1. Do any creditors have claims	secured by your	property?					
□ No. Check this box an	nd submit this fo	rm to the court with your other sch	nedules. You	have nothing else	to report or	n this form.	
Yes. Fill in all of the in	f						
Tes. Fill ill all of the life	itormation below	/ .					
Part 1: List All Secured	Claims		r congrately	Column A	Column E	3	Column C
Part 1: List All Secured 0 2. List all secured claims. If a c for each claim. If more than one	Claims reditor has more t creditor has a par	han one secured claim, list the credito ticular claim, list the other creditors in ler according to the creditor's name.		Amount of claim Do not deduct the	Value of that sup	3 collateral ports this	Unsecured portion
Part 1: List All Secured 0 2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims	Claims reditor has more t creditor has a par in alphabetical ord	han one secured claim, list the credito ticular claim, list the other creditors in	Part 2. As ´	Amount of claim	Value of that sup claim	collateral	Unsecured
Part 1: List All Secured 0 2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims	claims reditor has more to creditor has a partin alphabetical ordinal place. Des	nan one secured claim, list the credito ticular claim, list the other creditors in ler according to the creditor's name.	Part 2. As Claim:	Amount of claim Do not deduct the value of collateral.	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims H & H Investments Creditor's Name Atten: Hoffman &	claims reditor has more to creditor has a partin alphabetical ordinal place. Des	han one secured claim, list the credito ticular claim, list the other creditors in ler according to the creditor's name.	Part 2. As Claim:	Amount of claim Do not deduct the value of collateral.	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio	reditor has more to creditor has a par in alphabetical ordinal phabetical ph	han one secured claim, list the credito ticular claim, list the other creditors in ler according to the creditor's name.	Part 2. As ´ claim: gs	Amount of claim Do not deduct the value of collateral.	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio 23 Hunter Street	reditor has more to creditor has a partin alphabetical ordinal partin alphabetic	han one secured claim, list the credito ticular claim, list the other creditors in ler according to the creditor's name. cribe the property that secures the usehold Goods & Furnishing of the date you file, the claim is: Che	Part 2. As ´ claim: gs	Amount of claim Do not deduct the value of collateral.	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio 23 Hunter Street Woodbury, NJ 0809	reditor has more to creditor has a partin alphabetical ordinal partin alphabetical ord	han one secured claim, list the credito ticular claim, list the other creditors in ler according to the creditor's name. cribe the property that secures the usehold Goods & Furnishing of the date you file, the claim is: Chem.	Part 2. As ´ claim: gs	Amount of claim Do not deduct the value of collateral.	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio 23 Hunter Street	reditor has more to creditor has a partin alphabetical ordinary in alph	han one secured claim, list the credito ticular claim, list the other creditors in ler according to the creditor's name. cribe the property that secures the usehold Goods & Furnishing of the date you file, the claim is: Chem. Contingent Unliquidated	Part 2. As ´ claim: gs	Amount of claim Do not deduct the value of collateral.	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio 23 Hunter Street Woodbury, NJ 0809	reditor has more to creditor has a partin alphabetical ordinal partin alphabetical ord	han one secured claim, list the credito ticular claim, list the other creditors in ler according to the creditor's name. cribe the property that secures the usehold Goods & Furnishing of the date you file, the claim is: Chem. Contingent Unliquidated Disputed	Part 2. As ´ claim: gs	Amount of claim Do not deduct the value of collateral.	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio 23 Hunter Street Woodbury, NJ 0809 Number, Street, City, State & Z	reditor has more to creditor has a par in alphabetical ordinal phabetical ordinal has a par in alphabetical	han one secured claim, list the credito ticular claim, list the other creditors in ler according to the creditor's name. cribe the property that secures the usehold Goods & Furnishing of the date you file, the claim is: Chem. Contingent Unliquidated	Part 2. As claim: gs ck all that	Amount of claim Do not deduct the value of collateral. \$1,671.00	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio 23 Hunter Street Woodbury, NJ 0809 Number, Street, City, State & Z Who owes the debt? Check o	reditor has more to creditor has a partin alphabetical ordinary in alphabetical ordinary. Des Holians As a partin alphabetical ordinary in alphabetical ordinary. Des Holians As a partin alphabetical ordinary in alphabetical ordinary in alphabetical ordinary. As a partin alphabetical ordinary in alphabetical ordinary in alphabetical ordinary in alphabetical ordinary. As a partin alphabetical ordinary in alphabetica	han one secured claim, list the creditor ticular claim, list the other creditors in ler according to the creditor's name. cribe the property that secures the usehold Goods & Furnishing of the date you file, the claim is: Chem. Contingent Unliquidated Disputed ure of lien. Check all that apply.	Part 2. As claim: gs ck all that	Amount of claim Do not deduct the value of collateral. \$1,671.00	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a cfor each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio 23 Hunter Street Woodbury, NJ 0809 Number, Street, City, State & Z Who owes the debt? Check of Debtor 1 only Debtor 2 only	reditor has more to creditor has a partin alphabetical ordinal phabetical	han one secured claim, list the creditor ticular claim, list the other creditors in ler according to the creditor's name. cribe the property that secures the usehold Goods & Furnishing of the date you file, the claim is: Check contingent Unliquidated Disputed ure of lien. Check all that apply. An agreement you made (such as more car loan)	Part 2. As claim: gs ck all that	Amount of claim Do not deduct the value of collateral. \$1,671.00	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio 23 Hunter Street Woodbury, NJ 0809 Number, Street, City, State & Z Who owes the debt? Check o	reditor has more to creditor has a partin alphabetical ordination of the second	han one secured claim, list the creditor ticular claim, list the other creditors in ler according to the creditor's name. cribe the property that secures the usehold Goods & Furnishing of the date you file, the claim is: Chem. Contingent Unliquidated Disputed ure of lien. Check all that apply. An agreement you made (such as more car loan)	Part 2. As claim: gs ck all that	Amount of claim Do not deduct the value of collateral. \$1,671.00	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio 23 Hunter Street Woodbury, NJ 0809 Number, Street, City, State & Z Who owes the debt? Check of Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	reditor has more to creditor has a partin alphabetical ordinal phabetical pha	han one secured claim, list the creditor ticular claim, list the other creditors in ler according to the creditor's name. cribe the property that secures the usehold Goods & Furnishing of the date you file, the claim is: Check contingent Unliquidated Disputed ure of lien. Check all that apply. An agreement you made (such as more car loan)	Part 2. As claim: gs ck all that	Amount of claim Do not deduct the value of collateral. \$1,671.00	Value of that sup claim	collateral ports this	Unsecured portion
2. List all secured claims. If a c for each claim. If more than one much as possible, list the claims 2.1 H & H Investments Creditor's Name Atten: Hoffman & DiMuuzio 23 Hunter Street Woodbury, NJ 0809 Number, Street, City, State & Z Who owes the debt? Check o Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this claim relates t	reditor has more to creditor has a partin alphabetical ordination and the control of the control	han one secured claim, list the creditor ticular claim, list the other creditors in ler according to the creditor's name. cribe the property that secures the usehold Goods & Furnishing of the date you file, the claim is: Chem. Contingent Unliquidated Disputed ure of lien. Check all that apply. An agreement you made (such as more car loan) Statutory lien (such as tax lien, mechanical didgment lien from a lawsuit	Part 2. As claim: gs ck all that	Amount of claim Do not deduct the value of collateral. \$1,671.00	Value of that sup claim	collateral ports this	Unsecured portion

\$1,671.00 Write that number here:

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

								İ	
Fill	l in this informa	ation to identify your	case:						
De	btor 1	Shane N. Ciarroco							
D-	h.t 0	First Name	Middle	e Name	Last Nam	ie			
ı	btor 2 ouse if, filing)	First Name	Middle	Name	Last Nam	ie			
Un	ited States Bank	kruptcy Court for the:	DISTRICT	Γ OF NEW JERSEY					
_									
	se number							_	k if this is an nded filing
∩f	ficial Form	106E/E							
		F: Creditors W	ho Hav	e Unsecured (Claim	9			12/15
any Sch Sch left. nam	executory contra edule G: Executo edule D: Creditor Attach the Conti te and case numb	•	that could re ired Leases ured by Prop e. If you hav	esult in a claim. Also lis (Official Form 106G). Do perty. If more space is n e no information to rep	st execute o not incl eeded, c	ory contract ude any cre opy the Part	s on Schedule A/B: F ditors with partially s you need, fill it out,	Property (Official For secured claims that number the entries	orm 106A/B) and on are listed in in the boxes on the
		of Your PRIORITY Un							
1.		s have priority unsecure	d claims aga	inst you?					
	☐ No. Go to Par	12.							
^	Yes.	priority unsecured claims	- Iflit					h.f., h . l.;	on a sale sale in the sale
	identify what type possible, list the Part 1. If more the	e of claim it is. If a claim ha claims in alphabetical orde an one creditor holds a pa on of each type of claim, s	as both priority er according to articular claim,	y and nonpriority amounts to the creditor's name. If y list the other creditors in	s, list that ou have r Part 3.	claim here a nore than tw	nd show both priority a	and nonpriority amou	ints. As much as
							Total Claim	amount	amount
2.1		New Jersey		Last 4 digits of accoun	t number	1549	\$2,523.00	\$2,523.0	0 \$0.00
	PO Box 9	abor & Wkr Force 951	Dev	When was the debt inc	urred?	2010		-	
		NJ 08625-0951 eet City State Zlp Code		As of the date you file,	the claim	is: Chack a	II that apply		
		the debt? Check one.		☐ Contingent	aro orani	i io. Oncok c	ш шасарыу		
	Debtor 1 on	lv		☐ Unliquidated					
	Debtor 2 on	lv		☐ Disputed					
	Debtor 1 and	•		Type of PRIORITY unse	ecured cl	aim:			
		of the debtors and another	er	☐ Domestic support ob	ligations				
		s claim is for a commu		■ Taxes and certain oth	her debts	vou owe the	government		
		bject to offset?	,	☐ Claims for death or p		•	•		
	■ No			Other. Specify					
	☐ Yes				eged U	nemploy	ment Overpayme	ent	_
Pa	rt 2: List All	of Your NONPRIORIT	Y Unsecur	ed Claims					
3.		s have nonpriority unsec							
-		nothing to report in this p		0	our other	schedules.			
	Yes.								
4.	unsecured claim,	nonpriority unsecured cl list the creditor separately holds a particular claim, li	y for each clai	im. For each claim listed,	identify w	hat type of c	laim it is. Do not list cla	aims already include	d in Part 1. If more

Total claim

Debt	or 1 Shane N. Ciarrocchi		Case number (if know)	
4.1	Apex Asset	Last 4 digits of account number	2466	\$75.00
	Nonpriority Creditor's Name 2501 Oregon Pike	When was the debt incurred?	2011	
	Lancaster, PA 17601 Number Street City State Zlp Code	As of the date you file, the claim	is: Chack all that apply	
	Who incurred the debt? Check one.	As of the date you me, the claim	15. Спеск ан шасарргу	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Med Serv		
4.2	AR Resources	Last 4 digits of account number	6048	\$249.00
	Nonpriority Creditor's Name PO Box 1056	When was the debt incurred?	2009	
	Blue Bell, PA 19422	when was the debt incurred?	2009	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separe report as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharir	ng plans, and other similar debts	
	☐ Yes	■ Other. Specify Med Serv		
4.3	ARS Nonpriority Creditor's Name	Last 4 digits of account number		\$928.00
	1801 NW 66TH Avenue Fort Lauderdale, FL 33313	When was the debt incurred?	2010	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.			
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar debts	
	□Yes	■ Other Specify Med Serv		
	**	- Other opening		

Shane N. Ciarrocchi	Case number (if know)	
Atlantic City Electric	Last 4 digits of account number 5YFS	\$12,339.00
Nonpriority Creditor's Name Atten: Edward Costello, Esq 1201 New Rd., Ste 230 Linwood, NJ 08221	When was the debt incurred? 2011	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one. Debtor 1 only	□ Continued	
Debtor 2 only	☐ Contingent ☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you or report as priority claims	id not
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Alleged Acident	
Bridgeton Municipal Court Nonpriority Creditor's Name	Last 4 digits of account number 2689	\$100.00
1325 Highway 77 Bridgeton, NJ 08302	When was the debt incurred? 2016	
Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans	
dept Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you or report as priority claims 	id not
■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Mun Ct Fine	
Comcast Cable	Last 4 digits of account number 8291	\$646.00
Nonpriority Creditor's Name Atten: SW Credit Systms 4120 International Carrollton	When was the debt incurred? 2013	
Carrollton, TX 75007 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	☐ Disputed	
At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you of	lid not
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	Other. Specify Cred Adv	

1 Shane N. Ciarrocchi		Case number (if know)	
Commonwealth Financial	Last 4 digits of account number	04N1	\$972.00
Nonpriority Creditor's Name 245 Main Street	When was the debt incurred?	2011	
Scranton, PA 18519 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
\square Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Med Serv		
Convergent Healthcare	Last 4 digits of account number	7665	\$252.00
Nonpriority Creditor's Name 121 NE Jefferson Street Peoria, IL 61602	When was the debt incurred?	2012	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
☐ Yes	Other. Specify Med Serv		
Elk Municipal Court	Last 4 digits of account number	0069	\$1,510.00
Nonpriority Creditor's Name 680 Whig Lane Monroeville, NJ 08343	When was the debt incurred?	2012	
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	· ·	
□Yes	■ Other. Specify Mun Court	Fine	

Shane N. Ciarrocchi		Case number (if know)	
Financial Recovery	Last 4 digits of account number	3323	\$4,313.00
Nonpriority Creditor's Name 200 East Park Drive	When was the debt incurred?	2009	ψ 1,0 10100
Mount Laurel, NJ 08054 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,	or onest an inat appri	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	I claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify Med Serv		
IC Systems	Last 4 digits of account number	1001	\$186.00
Nonpriority Creditor's Name			Ψ.00.00
PO Box 64378 Saint Paul, MN 55164	When was the debt incurred?	2012	
Number Street City State ZIp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	_		
Debtor 1 only	Contingent		
Debtor 2 only	Unliquidated		
Debtor 1 and Debtor 2 only	Disputed	Lalaine	
At least one of the debtors and another	Type of NONPRIORITY unsecured ☐ Student loans	i ciaim:	
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
ls the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
No	Debts to pension or profit-sharin	g plans, and other similar debts	
□ Yes	Other. Specify Med Serv		
Inspira Health Network	Last 4 digits of account number	4816	\$1,031.00
Nonpriority Creditor's Name	_		
PO Box 48274	When was the debt incurred?	2016	
Newark, NJ 07101 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply	
Who incurred the debt? Check one.	,,,,,,		
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	l claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
□Yes	Other. Specify Med Serv		

1 Shane N. Ciarrocchi		Case number (if know)					
Qual Asset Recovery	Last 4 digits of account number	6327	\$2,944.00				
Nonpriority Creditor's Name 7 Foster Avenue	When was the debt incurred?	2013	¥ =, 0 1 0				
Gibbsboro, NJ 08026 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply					
Who incurred the debt? Check one.	•						
■ Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
☐ Check if this claim is for a community	☐ Student loans						
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not					
■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
□ Yes	Other. Specify Med Serv						
Qual Asset Recovery	Last 4 digits of account number	1826	\$62,600.00				
Nonpriority Creditor's Name			, , , , , , , , , , , ,				
7 Foster Avenue Gibbsboro, NJ 08026	When was the debt incurred?	2011					
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply					
Who incurred the debt? Check one.							
Debtor 1 only	Contingent						
Debtor 2 only	☐ Unliquidated						
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:					
At least one of the debtors and another	Student loans	a oldiiii.					
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not					
Is the claim subject to offset?	report as priority claims						
■ No	Debts to pension or profit-sharing	g plans, and other similar debts					
Yes	Other. Specify Med Serv						
Remex Inc	Last 4 digits of account number	4932	\$77.00				
Nonpriority Creditor's Name							
307 Wall Street Princeton, NJ 08540	When was the debt incurred?	2010					
Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply					
Who incurred the debt? Check one.							
Debtor 1 only	☐ Contingent						
Debtor 2 only	☐ Unliquidated						
☐ Debtor 1 and Debtor 2 only	☐ Disputed						
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:					
Check if this claim is for a community	Student loans						
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims						
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts						
□ Yes	Other. Specify Med Serv						

Debtor 1	Shane	N	Ciarrocchi
	Ollane	11.	Ciaiiocciii

Case number (if know)

USA Funds	Last 4 digits of account number	4450	\$635.0
Nonpriority Creditor's Name	_		
PO Box 9460	When was the debt incurred?	2011	
Wilkes Barre, PA 18773	_		
Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
Who incurred the debt? Check one.			
Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt	Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
No	Debts to pension or profit-sharing	g plans, and other similar debts	
☐ Yes	Other. Specify Cred Adv		

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Т	otal Claim
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	2,523.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	2,523.00
				T	otal Claim
	6f.	Student loans	6f.	\$	0.00
Total claims					
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	88,857.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	88,857.00

Fill in this infor	Fill in this information to identify your case:							
Debtor 1	Shane N. Ciarroc	chi						
	First Name	Middle Name	Last Name	-				
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name	-				
United States Ba	ankruptcy Court for the:	DISTRICT OF NEW JERSEY		-				
Case number (if known)				☐ Check if this is an amended filing				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 Jim Sullivan, Inc PO Box 237 Franklinville, NJ 08322 **Residental Lease**

Fill in thi	s information to identify you	ir case.			
Debtor 1	Shane N. Ciarro				
Depioi	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the	: DISTRICT OF NEW JER	SEY		
Case nur (if known)	nber				☐ Check if this is an amended filing
	al Form 106H <mark>dule H: Your Co</mark>	debtors			12/15
people ar ill it out, our nam	e filing together, both are ed and number the entries in the e and case number (if know	qually responsible for suppl ne boxes on the left. Attach	lying correct information the Additional Page to	n. If more space is n this page. On the top	ate as possible. If two married needed, copy the Additional Page, p of any Additional Pages, write
□ No)				
■ Ye	es				
		ou lived in a community pro na, Nevada, New Mexico, Pue			y states and territories include
■ No	o. Go to line 3.				
□ Ye	es. Did your spouse, former sp	oouse, or legal equivalent live	with you at the time?		
in lir Forn	e 2 again as a codebtor onl	y if that person is a guarante	or or cosigner. Make su	ire you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor Name, Number, Street, City, State and	d ZIP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1	Rose Smith 2 Stella Dr. Pittsgrove, NJ 08318			☐ Schedule D, li☐ Schedule E/F,☐ Schedule G☐ Jim Sullivan, Ind	, line 2.1

Schedule H: Your Codebtors

						_					
Fill	in this information to identify your c	ase:									
Del	btor 1 Shane N. Ci	arrocchi			_						
1 -	btor 2 puse, if filing)				_						
Uni	ited States Bankruptcy Court for the	E: DISTRICT OF NEW J	IERSEY		_						
(If ki	se number fficial Form 106l		-			☐ Ar ☐ A 13		ed filing ent sho as of th	owing _l	postpetitio owing date	
S	chedule I: Your Inc	ome				1411	WI / DD/				12/15
spo atta Pa	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. It 1: Describe Employment	ır spouse is not filing w	ith you, do not inclu	de inforn	natio	on about	your sp	ouse. I	If more	e space is	needed,
1.	Fill in your employment information.		Debtor 1				Debtor	2 or no	on-filir	ng spouse	•
	If you have more than one job, attach a separate page with information about additional	Employment status	☐ Employed ■ Not employed	•			☐ Employed ☐ Not employed				
	employers. Include part-time, seasonal, or self-employed work.	Occupation Employer's name									
	Occupation may include student or homemaker, if it applies.	Employer's address									
		How long employed t	here?				_				
Pai	rt 2: Give Details About Mo	nthly Income									
	imate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	eport for a	any l	line, write	\$0 in the	space	. Inclu	ıde your no	on-filing
-	ou or your non-filing spouse have mee space, attach a separate sheet to		ombine the information	n for all e	emplo	oyers for t	hat perso	on on tl	he line	es below. If	you need
						For Deb	tor 1			or 2 or g spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$		N/A	-
3.	Estimate and list monthly over	ime pay.		3.	+\$		0.00	+\$		N/A	<u>-</u>
1	Calculate gross Income Add li	00 2 1 lino 2		1	\$		0.00	\$		NI/A	

				For Debtor 1				For Debtor 2 or non-filing spouse			
	Сору	y line 4 here	4.		\$		0.00	\$	······································	N/A	
								_			
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a.		\$	(0.00	\$		N/A	Δ.
	5b.	Mandatory contributions for retirement plans	5b.		\$		0.00	\$		N/A	4
	5c.	Voluntary contributions for retirement plans	5c.		\$		0.00	\$		N/A	4
	5d.	Required repayments of retirement fund loans	5d.		\$		0.00	\$		N/A	4
	5e.	Insurance	5e.		\$		0.00	\$		N/A	4
	5f.	Domestic support obligations	5f.		\$		0.00	\$		N/A	4
	5g.	Union dues	5g.		\$		0.00	\$		N/A	4
	5h.	Other deductions. Specify:	5h.	.+	\$	(0.00	+ \$		N/A	4
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_		0.00	\$_		N/A	<u> </u>
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$		0.00	\$		N/A	4
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8 a.		\$		0.00	\$		N//	A
	8b.	Interest and dividends	8b.		\$		0.00	\$		N/A	
	8c.	Family support payments that you, a non-filing spouse, or a depender regularly receive Include alimony, spousal support, child support, maintenance, divorce	nt					_			_
		settlement, and property settlement.	8c.		\$_	(0.00	. \$_		N/A	<u> </u>
	8d.	Unemployment compensation	8d.		\$		0.00	\$_		N/A	
	8e.	Social Security	8e.		\$	62	1.00	\$		N/A	4
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.		\$_	ı	0.00	\$_		N//	<u> </u>
	8g.	Pension or retirement income	8g.		\$_		0.00	. \$_		N/A	<u> </u>
	8h.	Other monthly income. Specify: Mother's (SSI) Contribution	8h.	.+	\$	1,01	2.00	+ \$_		N/A	<u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	Ş	\$	1,63	3.00	\$_		N,	/A
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		1,633.00	+ \$		N/A	= \$	1,633.00
11.	Include other	e all other regular contributions to the expenses that you list in <i>Schedul</i> de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are notify:	ur depe						Schedul	e <i>J.</i> +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certies							e. 12.	\$	1,633.00
											nly income
13.	Do y∈	ou expect an increase or decrease within the year after you file this form No. Yes. Explain:	m?								

Fill	n this information to identify your case:				
Deb	tor 1 Shane N. Ciarrocchi		Che	ck if this is:	
Deh	tor 2			An amended filing	ving postpetition chapter
	buse, if filing)			13 expenses as of	
Unit	ed States Bankruptcy Court for the: DISTRICT OF NEW JERSEY			MM / DD / YYYY	
Cas	e numbe r				
(If kı	nown)				
Of	ficial Form 106J				
S	chedule J: Your Expenses				12/15
Be info	as complete and accurate as possible. If two married people ard rmation. If more space is needed, attach another sheet to this for his formation. If known). Answer every question.	e filing together, bo form. On the top of	oth are equ any additi	ially responsible fo onal pages, write y	or supplying correct rour name and case
Par 1.	Is this a joint case?				
	■ No. Go to line 2. □ Yes. Does Debtor 2 live in a separate household?				
	☐ No ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses</i>	for Separate House	hold of Deb	otor 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.			_	□ Yes □ No
					☐ Yes
					□ No
					☐ Yes
					□ No □ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No			_	1 163
Par	Estimate Your Ongoing Monthly Expenses				
Est exp	imate your expenses as of your bankruptcy filing date unless your enses as of a date after the bankruptcy is filed. If this is a supplicable date.				
	ude expenses paid for with non-cash government assistance if				
	value of such assistance and have included it on Schedule I: Yorkidal Form 106I.)	our Income		Your expo	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	nclude first mortgage	4. \$.	800.00
	If not included in line 4:				
	4a. Real estate taxes		4a. S	\$	0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. 3	·	20.00
5.	 Homeowner's association or condominium dues Additional mortgage payments for your residence, such as hor 	ne equity loans	4d. \$ 5. \$	·	0.00 0.00

Debtor 1	١.	Shane N	. Ciarrocchi	Case nur	nb	oer (if known)	
i. Uti	liti	es.					
6a.			heat, natural gas	6a		\$	125.00
6b.			ver, garbage collection	6b		\$	0.00
6c.			e, cell phone, Internet, satellite, and cable services	6c		\$	80.00
6d.		Other. Spe		6d		\$	0.00
			ekeeping supplies	od 7		\$	250.00
			hildren's education costs	8		\$	
_				9		\$	0.00
		-	ry, and dry cleaning	-		·	15.00
		•	roducts and services	10		\$	20.00
			ntal expenses	11.		\$	0.00
		•	Include gas, maintenance, bus or train fare.	12		\$	100.00
			ar payments. clubs, recreation, newspapers, magazines, and books			\$	0.00
			ributions and religious donations	14	•	\$	0.00
5. Ins			auranae daduatad from vaur nav ar ingludad in lines 4 ar C	20			
		t include in Life insura	surance deducted from your pay or included in lines 4 or 2	20. 15a		¢	0.00
		Health ins		15a 15b		\$	0.00
		Vehicle ins		15c		\$	101.00
			rance. Specify:	15d		\$	0.00
_			clude taxes deducted from your pay or included in lines 4			•	
Spe				16		\$	0.00
			ease payments:	47-		•	2.22
			ents for Vehicle 1	17a		·	0.00
			ents for Vehicle 2	17b		\$	0.00
		Other. Spe		17c		\$	0.00
170	d.	Other. Spe	ecify:	17d		\$	0.00
			of alimony, maintenance, and support that you did no			•	0.00
			your pay on line 5, Schedule I, Your Income (Official Fo			·	0.00
9. Otł	ner	r payments	s you make to support others who do not live with you	•		\$	0.00
Spe		·		19			
			erty expenses not included in lines 4 or 5 of this form				
			s on other property	20a			0.00
20k	٥.	Real estat	e taxes	20b		\$	0.00
			nomeowner's, or renter's insurance	20c		\$	0.00
200	d.	Maintenar	ce, repair, and upkeep expenses	20d		\$	0.00
206	€.	Homeown	er's association or condominium dues	20e		\$	0.00
. Oth	ner	r: Specify:		21.		+\$	0.00
					ſ		
		•	nonthly expenses				
			through 21.			\$	1,511.00
22t	o. (Copy line 2:	2 (monthly expenses for Debtor 2), if any, from Official For	m 106J-2		\$	
220	c. <i>F</i>	Add line 22a	a and 22b. The result is your monthly expenses.			\$	1,511.00
							-,
		-	monthly net income.				
			12 (your combined monthly income) from Schedule I.	23a		\$	1,633.00
23b	ο.	Copy your	monthly expenses from line 22c above.	23b		-\$	1,511.00
					Γ		
230	Э.		our monthly expenses from your monthly income.	00-		¢	122.00
		The result	is your monthly net income.	23c	٠ [\$	122.00
For	ex	ample, do yo	an increase or decrease in your expenses within the you expect to finish paying for your car loan within the year or do you terms of your mortgage?				or decrease because of a
			Simo S. year mongago.				
			Fundada hana				
	Ye	es.	Explain here:				

Fill in this infor	mation to identify your	case:			
Debtor 1	Shane N. Ciarroco	chi			
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	DISTRICT OF NEW JERSEY			
Case number					
(if known)					☐ Check if this is an amended filing
Official For		ar land'i dan di Da	latania Oalaada		
Declara	tion About a	n Individual De	ebtor's Schedi	uies	12/15
obtaining mone years, or both. 1		le bankruptcy schedules or an n connection with a bankruptc 519, and 3571.			
Did you pa	ay or agree to pay some	one who is NOT an attorney to	help you fill out bankrupto	cy forms?	
■ No					
☐ Yes.	Name of person				ptcy Petition Preparer's Notice, nd Signature (Official Form 119)
	alty of perjury, I declare re true and correct.	that I have read the summary	and schedules filed with th	is declaration	and
X /s/ Sha	ane N. Ciarrocchi		X		
Shane	e N. Ciarrocchi ure of Debtor 1		Signature of Debtor 2		
Date	August 13, 2016		Date		

Fil	l in this inforn	nation to identify you	r case:			
De	btor 1	Shane N. Ciarro	<u> </u>	Last Name		
De	btor 2	First Name	Middle Name	Last Name		
1	ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	DISTRICT OF NEW JERS	SEY		
1	se number _				-	heck if this is an mended filing
St	as complete a	of Financial		re filing together, both are	equally responsible for sup	
		n). Answer every que		uns form. On the top of an	y additional pages, write you	ii iiailie aliu case
			arital Status and Where You	Lived Before		
1.	What is you	r current marital statu	IS?			
	■ Married □ Not mar					
2.	During the la	ast 3 years, have you	lived anywhere other than v	where you live now?		
	■ No □ Yes. Lis	et all of the places you l	lived in the last 3 years. Do no	ot include where you live nov	<i>i</i> .	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
3. stat					ity property state or territory ico, Texas, Washington and W	
	■ No □ Yes. Ma	ake sure you fill out <i>Scl</i>	hedule H: Your Codebtors (Of	ficial Form 106H).		
Pa	rt 2 Explai	n the Sources of You	ır Income			
4.	Fill in the tota	al amount of income yo	nployment or from operating u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	r last calenda nuary 1 to De	r year: ecember 31, 2015)	■ Wages, commissions, bonuses, tips	\$3,215.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	

Official Form 107

5.	Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.											
	List each	List each source and the gross income from each source separately. Do not include income that you listed in line 4.										
	■ No □ Yes. Fill in the details.											
				Debtor 1 Sources Describe	of income	each (befo	es income from source re deductions and sions)	Describ	2 s of inc e below		Gross incom (before dedu and exclusion	ctions
Pa	rt 3: Lis	t Certain Pa	yments You	Made Bef	ore You Filed for	r Bankruj	otcy					
6.	Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by a individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to a attorney for this bankruptcy case.							you so, do				
	Creditor	's Name and	d Address		Dates of paym	ent	Total amount paid		t you I owe	Was this p	ayment for	
7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporation of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider.								g one fo			
	Insider's	Name and	Address		Dates of paym	ent	Total amount paid		t you I owe	Reason for	r this paymen	t
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider											
	Insider's	Name and	Address		Dates of paym	ent	Total amount paid		t you I owe		r this payment ditor's name	t
							palu	ətii		include cle	andi 3 Hallic	

Case number (if known)

Debtor 1 Shane N. Ciarrocchi

Par	t 4: Identify Legal Actions, Repossess	sions, and Foreclosures						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.							
	■ No □ Yes. Fill in the details.							
	Case title Case number	Nature of the case	Court or agency	Status of th	e case			
10.	Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below.							
	No. Go to line 11.Yes. Fill in the information below.							
	Creditor Name and Address	Describe the Property		Date	Value of the			
		Explain what happened	d		property			
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.							
	Creditor Name and Address	Describe the action the	e creditor took	Date action was taken	Amount			
12.	 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes 							
Par	t 5: List Certain Gifts and Contribution	18						
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.							
	Gifts with a total value of more than \$60	Describe the gifts		Dates you gave	Value			
	per person	3 3		the gifts				
	Person to Whom You Gave the Gift and Address:	I						
14.	Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No							
	 Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value 							
	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Cod		a contributed	Dates you contributed	Value			
Par	t 6: List Certain Losses							
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?							
	■ No □ Yes. Fill in the details.							
	Describe the property you lost and	Describe any insurance co	verage for the loss	Date of your	Value of property			
	how the loss occurred	Include the amount that insurance claims on line 33 of		loss	lost			

Case number (if known)

Debtor 1 Shane N. Ciarrocchi

Debtor 1 Shane N. Ciarrocchi Case number (if known)

Par	List Certain Payments or Transfers								
16.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.								
	□ No								
	Yes. Fill in the details.								
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred		y Date payment or transfer was made	Amount of payment				
	Access Credit Counseling	Credit Counsel	ing	08/04/2016	\$15.00				
17.	Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.								
	Person Who Was Paid Address	Description and transferred	Description and value of any property transferred		Amount of payment				
	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.								
	Person Who Received Transfer Address	property transferred payr		Describe any property or payments received or debts paid in exchange	Date transfer was made				
19.	Person's relationship to you Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.								
	Name of trust	Description and	Description and value of the property transferred						
Par	t 8: List of Certain Financial Accounts, In	struments, Safe Deposi	t Boxes, and Storag	e Units					
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.								
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account o instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer				

Debtor 1 Shane N. Ciarrocchi Case number (if known)

21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?									
	■ No □ Yes. Fill in the details.									
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?						
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?									
	■ No □ Yes. Fill in the details.									
	Name of Storage Facility	Who else has or had access	Describe the contents	Do you still						
	Address (Number, Street, City, State and ZIP Code)	to it? Address (Number, Street, City, State and ZIP Code)		have it?						
Par	t 9: Identify Property You Hold or Control for S	Someone Else								
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.									
	■ No									
	Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value						
Par	t 10: Give Details About Environmental Informa	tion								
or	the purpose of Part 10, the following definitions a	apply:								
	Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used									
	to own, operate, or utilize it, including disposal s		waata hamardaya aybatanaa tayla a	toxia substance						
	Hazardous material means anything an environment hazardous material, pollutant, contaminant, or s		waste, nazardous substance, toxic s	substance,						
₹ер	ort all notices, releases, and proceedings that yo	u know about, regardless of when	they occurred.							
24.	Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?									
	No									
	Yes. Fill in the details.			5						
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						
25.	Have you notified any governmental unit of any release of hazardous material?									
	■ No									
	Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice						

26.	Hav	re you been a party in any judicial or adr	ninistrative proceeding under any env	ironmenta	al law? Include settlements	and orders.
		No				
	Ca	Yes. Fill in the details. se Title	Court or agency	Nature (of the case	Status of the
		se Number	Name Address (Number, Street, City, State and ZIP Code)	Nature	n the case	case
Pa	rt 11:	Give Details About Your Business or	Connections to Any Business			
27.	Wit	hin 4 years before you filed for bankrupt	cv. did vou own a business or have a	nv of the f	ollowing connections to an	v business?
		☐ A sole proprietor or self-employed i		-	_	•
		☐ A member of a limited liability comp	pany (LLC) or limited liability partnersh	ip (LLP)	·	
		☐ A partner in a partnership				
		☐ An officer, director, or managing ex	ecutive of a corporation			
		☐ An owner of at least 5% of the votin	·			
		No. None of the above applies. Go to I				
	_	Yes. Check all that apply above and fill		\$		
		siness Name	Describe the nature of the business		ployer Identification number	er
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	Do	not include Social Security	number or ITIN.
	•	, , ,	Name of accountant of Bookkeeper	Dat	tes business existed	
28.		hin 2 years before you filed for bankrupt itutions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statement	to anyone	about your business? Incl	ude all financial
	Ad	me dress mber, Street, City, State and ZIP Code)	Date Issued			
Po		Sign Below				
l ha are with 18 l	ve re true n a ba J.S.C	and the answers on this Statement of Fir and correct. I understand that making a ankruptcy case can result in fines up to c. §§ 152, 1341, 1519, and 3571.	false statement, concealing property,	or obtain	ing money or property by fr	
Sh	ane	N. Ciarrocchi re of Debtor 1	Signature of Debtor 2			
Da	te _	August 13, 2016	Date			
Did ■ N	10	attach additional pages to Your Stateme	ent of Financial Affairs for Individuals	Filing for	Bankruptcy (Official Form 1	07)?
Did ■ N		pay or agree to pay someone who is no	t an attorney to help you fill out bankro	uptcy forn	ns?	
	es. I	Name of Person Attach the <i>Bankru</i>	ptcy Petition Preparer's Notice, Declarati	on, and S	ignature (Official Form 119).	

Case number (if known)

Debtor 1 Shane N. Ciarrocchi

Fill in this inform	nation to identify your case:
Debtor 1	Shane N. Ciarrocchi
Debtor 2 (Spouse, if filing)	
United States B	Sankruptcy Court for the: District of New Jersey
Case number (if known)	

Check	as directed in lines 17 and 21:
	ording to the calculations required by this rement:
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).
	3. The commitment period is 3 years.
	4. The commitment period is 5 years.

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Par	Calculate Your Average Monthly Income							
1.	What is your marital and filing status? Check one of	only.						
	■ Not married. Fill out Column A, lines 2-11.							
	☐ Married. Fill out both Columns A and B, lines 2-11	•						
1 th	ill in the average monthly income that you received from a 01(10A). For example, if you are filing on September 15, the 6- tie 6 months, add the income for all 6 months and divide the toto pouses own the same rental property, put the income from that	month per al by 6. Fil	riod would II in the re	l be March 1 sult. Do not i	throu nclud	ıgh August 31. If the an de any income amount ι	nount of your monthly incom more than once. For examp	ne varied during le, if both
						Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and co	mmissi	ons (before	all	\$ 1,052.52	\$	
3.	Alimony and maintenance payments. Do not includ Column B is filled in.	e payme	nts from	a spouse if	:	\$0.00	\$	
4.	All amounts from any source which are regularly pof you or your dependents, including child suppor from an unmarried partner, members of your househound roommates. Include regular contributions from a stilled in. Do not include payments you listed on line 3.	t. Include	e regula: depende	r contributio nts, parents	ns s, ot	\$0.00	\$	
5.	Net income from operating a business, profession, or farm	Debtor	1					
	Gross receipts (before all deductions)	\$	0.00					
	Ordinary and necessary operating expenses	-\$	0.00					
	Net monthly income from a business, profession, or fa	rm \$ _	0.00	Copy her	e -> :	\$	\$	
6.	Net income from rental and other real property	Debtor	1					
	Gross receipts (before all deductions)	\$_	0.00					
	Ordinary and necessary operating expenses	- \$ _	0.00					
	Net monthly income from rental or other real property	\$	0.00	Copy her	e -> :	\$ 0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

						Column A Debtor 1		Column B Debtor 2 c non-filing		
7.	Intere	est, dividends, and royalties				\$	0.00	\$		
8.	Unen	ployment compensation				\$	0.00	\$		
		ot enter the amount if you contend ocial Security Act. Instead, list it h		was a benefi	t under					
	Foi	r you	\$ \$	0.0	00					
		r your spouse								
	benef	ion or retirement income. Do no it under the Social Security Act.	·			\$	0.00	\$		
10.	Do no receiv dome	ne from all other sources not lis ot include any benefits received ur red as a victim of a war crime, a c stic terrorism. If necessary, list othe pelow.	nder the Social Security Acrime against humanity, or i	t or payment international	ts or					
						\$	0.00	\$		
						\$	0.00	\$		
		Total amounts from separate p	pages, if any.		+	\$	0.00	\$		
11.	Calcu each	ulate your total average monthly column. Then add the total for Co	r income. Add lines 2 throu lumn A to the total for Colu	ugh 10 for umn B.	\$	1,052.52	+ \$_		= \$	1,052.52
										al average nthly income
Part	2:	Determine How to Measure Yo	our Deductions from Inco	ome					IIIO	itiliy income
12.	Copy	your total average monthly inc	ome from line 11.						\$	1,052.52
13.	_	You are not married. Fill in 0 belov								
				olow						
		You are married and your spouse You are married and your spouse		eiow.						
	_	Fill in the amount of the income lis	0 ,	hat was NOT	regula	rly paid for th	ne housel	nold expense	s of vou or	VOUR
		dependents, such as payment of t								
		Below, specify the basis for excludadjustments on a separate page.	ding this income and the ar	mount of inco	ome dev	voted to each	n purpose	. If necessary	, list addit	ional
	I	f this adjustment does not apply,	enter 0 below.							
					\$ <u> </u>		_			
					Ψ— +\$		_			
					-Ψ					
		Total			\$	0.0	0Co	py here=>		0.00
14.	You	r current monthly income. Sub	tract line 13 from line 12.						\$	1,052.52
15.		culate your current monthly inco	ome for the year. Follow	these steps:					Φ.	1,052.52
	15a.								\$.,002.02
		Multiply line 15a by 12 (the num	nber of months in a year).						x 1	2
	15b.	The result is your current month	nly income for the year for t	this part of th	e form.				\$	12,630.24
										=

Debte	or 1	Shane N. Ciarrocchi		Case number (if known)	
16	. Calo	culate the median family income that applies to	you. Follow these ste	ps:	
	16a	Fill in the state in which you live.	NJ		
	16h	Fill in the number of people in your household.	1		
		Fill in the median family income for your state and			¢ 61,347.00
	100.	To find a list of applicable median income amounts instructions for this form. This list may also be ava	s, go online using the		\$
17	. Hov	do the lines compare?	nable at the bankrupt	cy cierk's office.	
	17a.	Line 15b is less than or equal to line 16c. (11 U.S.C. § 1325(b)(3). Go to Part 3. Do N			
	17b.	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14 a	ulation of Your Disp		
Par	t 3:	Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)(4)		
18.	Сор	y your total average monthly income from line 1	1.		\$ 1,052.52
19.	cont	uct the marital adjustment if it applies. If you are end that calculating the commitment period under 1 use's income, copy the amount from line 13.			
	•	If the marital adjustment does not apply, fill in 0 on	line 19a.		-\$0.00
	401	Outstand the 40s from the 40			0 4.052.52
	196.	Subtract line 19a from line 18.			\$1,052.52
20.	Cald	culate your current monthly income for the year.	. Follow these steps:		
	20a	Copy line 19b			\$1,052.52
		Multiply by 12 (the number of months in a year).			x 12
	20b	The result is your current monthly income for the y	ear for this part of the	form	\$ 12,630.24
	200	Converted modifier family income for your state and	size of boundhold fro	m line 16e	\$ 61,347.00
	200.	Copy the median family income for your state and	size of nousehold fro	miline roc	01,347.00
	21.	How do the lines compare?			
		■ Line 20b is less than line 20c. Unless otherwiperiod is 3 years. Go to Part 4.	ise ordered by the co	urt, on the top of page 1 of this form, che	ck box 3, The commitment
		Line 20b is more than or equal to line 20c. Ur commitment period is 5 years. Go to Part 4.	nless otherwise order	ed by the court, on the top of page 1 of the	nis form, check box 4, The
Par	t 4:	Sign Below			
	By s	igning here, under penalty of perjury I declare that	the information on this	s statement and in any attachments is tru	ue and correct.
)	(/s/	Shane N. Ciarrocchi			
	Sh	ane N. Ciarrocchi nature of Debtor 1			
	Date	August 13, 2016			
	If wo	MM / DD / YYYY u checked 17a, do NOT fill out or file Form 122C-2.			
	-	u checked 17b, fill out Form 122C-2 and file it with		of that form, copy your current monthly in	come from line 14 above

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of New Jersey

	1	District of New Jersey			
In	re Shane N. Ciarrocchi		Case No		
		Debtor(s)	Chapter	13	
	DISCLOSURE OF COMPE	NSATION OF ATTO	RNEY FOR D	EBTOR(S)	
1.	Pursuant to 11 U .S.C. § 329(a) and Fed. Bankr. P. 2016 compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation	ng of the petition in bankruptcy	y, or agreed to be pai	d to me, for services r	
	For legal services, I have agreed to accept		\$	3,400.00	
	Prior to the filing of this statement I have received		\$	0.00	
	Balance Due		\$	3,400.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed comp	pensation with any other person	n unless they are me	mbers and associates of	of my law firm.
	☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the na				law firm. A
5.	In return for the above-disclosed fee, I have agreed to re	ender legal service for all aspec	cts of the bankruptcy	case, including:	
	 a. Analysis of the debtor's financial situation, and rendebtor. b. Preparation and filing of any petition, schedules, state. c. Representation of the debtor at the meeting of credited. d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applications applications. 522(f)(2)(A) for avoidance of liens on how 	tement of affairs and plan which ors and confirmation hearing, a reduce to market value; ex ons as needed; preparatio	th may be required; and any adjourned he cemption planning	earings thereof;	filing of
6.	By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis- any other adversary proceeding.			ces, relief from sta	y actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of an abankruptcy proceeding.	ny agreement or arrangement for	or payment to me for	representation of the	debtor(s) in
	August 13, 2016	/s/ Anthony Lan	dolfi		
	Date	Anthony Landol Signature of Attorn			
		Anthony Landol			
		PO Box 111	ile		
		295 Bridgeton P Mantua, NJ 0805			
		(856)468-5900			
		anthony@lando Name of law firm	Ifilaw.com		
		ivame oj taw firm			

United States Bankruptcy Court District of New Jersey

abo	ove-named Debtor hereby verifies th	nat the attached list of creditors is true and	l correct to the best	of his/her knowledge.
	VERI	FICATION OF CREDITOR	R MATRIX	
		Debtor(s)	Chapter	13

Signature of Debtor

Apex Asset 2501 Oregon Pike Lancaster, PA 17601

AR Resources PO Box 1056 Blue Bell, PA 19422

ARS 1801 NW 66TH Avenue Fort Lauderdale, FL 33313

Atlantic City Electric Atten: Edward Costello, Esq 1201 New Rd., Ste 230 Linwood, NJ 08221

Bridgeton Municipal Court 1325 Highway 77 Bridgeton, NJ 08302

Comcast Cable
Atten: SW Credit Systms
4120 International Carrollton
Carrollton, TX 75007

Commonwealth Financial 245 Main Street Scranton, PA 18519

Convergent Healthcare 121 NE Jefferson Street Peoria, IL 61602

Elk Municipal Court 680 Whig Lane Monroeville, NJ 08343

Financial Recovery 200 East Park Drive Mount Laurel, NJ 08054 H & H Investments Atten: Hoffman & DiMuuzio 23 Hunter Street Woodbury, NJ 08096

IC Systems
PO Box 64378
Saint Paul, MN 55164

Inspira Health Network PO Box 48274 Newark, NJ 07101

Jim Sullivan, Inc PO Box 237 Franklinville, NJ 08322

Qual Asset Recovery 7 Foster Avenue Gibbsboro, NJ 08026

Remex Inc 307 Wall Street Princeton, NJ 08540

Rose Smith 2 Stella Dr. Pittsgrove, NJ 08318

State of New Jersey
Dept of Labor & Wkr Force Dev
PO Box 951
Trenton, NJ 08625-0951

USA Funds PO Box 9460 Wilkes Barre, PA 18773